

Accepted\_\_\_ Denied\_\_\_

## **University of California, Merced Police Department Police Insight Program Application**

## \*\*Class limited to 13 participants. Submit application as soon as possible to reserve your spot in the program.\*\*

Name (Last, First, M.	I.):		
			ZIP
Telephone:	Cell:	E-mail:	
Date of Birth:	_ Sex: M / F (circle) D	Oriver's License/ID Card #	<u>:                                      </u>
Occupation:	Employer:	Work Phone:_	
Are you a UC Merce Are you a UC Merce		Yes No ber? Yes No	
	st arrests, convictions have to include infract		(Include all misdemeanors and
Are you on criminal Yes No	probation or parole?		
If you answered yes, additional sheet if nec		enforcement agency, char	rge and disposition. Attach an
Date:Age	ncy:	Charge:	
Disposition:			
Department as part of the Police Department any a evaluating my eligibility entitled to know the conharmless the agencies, the	inal background check are application process. I a and all information for the top articipate in the Cititetts of confidential reposite	authorize any law enforcemer e limited purpose of aiding th zen Police Academy. I under orts received from said agencion furnishing information fron	ducted by the UC Merced Police nt agency to release to the UC Merced to UC Merced Police Department in restand that I will not receive and am nes. I hereby release, discharge and hon any and all liability arising out of
Signature of Applicar	nt:	Date:	
Applicants Printed Na	ame:		
FOR OFFICE USE:			
Date/Time Submitte	d:	_/ Accepte	ed By:
W			
warrant Check Con	npleted Date/Time		By